



## PLEASE TYPE

(Form designed for use on elite (12 pitch) typewriter.)

EPA Form 8700-22 (Rev. 6-89)

Form Approved. OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address U.S. EPA REGION II HSE-5J 77 W. JACKSON BLVD CHICAGO IL 60604		Location If Different 14752 SPARKLING HARVEY IL 60429		A. Illinois Manifest Document Number IL 7113887 FEE PAID IF APPLICABLE		
4. "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" 18005000575		6. US EPA ID Number IND058484114		B. Illinois Generator's ID 103121211301016		
5. Transporter 1 Company Name HERITAGE TRANSPORT		8. US EPA ID Number		C. Illinois Transporter's ID 1151574		
7. Transporter 2 Company Name		10. US EPA ID Number ILD088349264		D. (317) 3816848 Transporter's Phone		
9. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SVCS, 15330 CANAL BANK RD LEMONT IL 60439		12. Containers No. Type		E. Illinois Transporter's ID		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		13. Total Quantity		F. ( ) Transporter's Phone		
a. RQ, WASTE SULFAMIC ACID, 8, UN2967, PG III (RQD002) ERG#154		0.2.3		G. Illinois Facility's ID 103121216201017		
b.				H. Facility's Phone 630 739 1151		
c.				I. Waste No. EPA HW Number X X X Authorization Number X X X		
d.				EPA HW Number X X X Authorization Number X X X		
J. Additional Description for Materials Listed Above 11A) 23X55DF WS# 43421-3		K. Handling Codes for Wastes Listed Above In Item #14 Job 10383 P.O. 79750				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, and disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name FRED BARTMAN		Signature Fred Bartman		Date Month Day Year 11/17/97		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature William J. Murray		Date Month Day Year 11/17/97		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Signature Mary Richardsm		Date Month Day Year 11/17/97		

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.



*The Illinois Uniform Manifest must be used for all shipments of special waste (hazardous and nonhazardous) stored, disposed of, treated or reclaimed in Illinois; and for all shipments originating in Illinois and destined for states that do not print and supply the form. PIMW (Potentially Infectious Medical Waste) requires a different manifest. For shipments not originating in Illinois, if the generator's state requires copies of the manifest, a photocopy of part I should be used.*

#### INSTRUCTIONS TO GENERATORS (Please type)

1. Enter generator's USEPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g. 00001) by the generator.
2. Enter the total number of pages comprising this Manifest.
3. Enter generator's name and mailing address. If location of waste generation is different from mailing address, enter location to the right of mailing address.
4. Enter telephone number where an authorized agent of the generator, who has knowledge of the waste, may be reached in the event of an emergency.
- B. Enter the generator's Illinois EPA ten digit identification number.
- 5, 6. For the first transporter who will transport the waste, enter the company name, USEPA ID number, Illinois EPA four digit Special Waste Hauling (SWH) Permit number, and telephone number where an authorized agent of the transporter may be reached in the event of an emergency.
- C, D.
- 7, 8. If applicable, enter the information requested for the second transporter who will transport the waste.
- E, F.
- 9, 10. For the facility designated to receive the waste, enter company name, address, USEPA ID Number, Illinois EPA ten digit facility code number, and telephone number where an authorized agent of the receiving facility may be reached.
- G, H.
11. Enter the US DOT Proper Shipping Name, Hazard Class, and ID number (NA/UN number) for each waste as identified in 49 CFR 171 through 177. For wastes not regulated as Hazardous Materials by DOT, enter a description of the waste and the generic name of the waste, plus the phrase "not hazardous by DOT".
12. Enter the number of containers for each waste and the appropriate abbreviations for the type of container:  

CM = Metal boxes or roll offs	DM = Metal drums
CW = Wooden boxes	DW = Wooden drums
CF = Fiberboard or plastic bags	DF = Fiberboard or plastic drums
BA = Burlap, cloth, paper or plastic bags.	
CY = Cylinders	TT = Tank trucks
DT = Dump trucks	TP = Tanks portable
TC = Tank cars	
13. Enter the total quantity of each waste.
14. Enter unit of measure from list below:  

G = Gallons	P = Pounds
T = Tons	Y = Cubic Yards
L = Liters	K = Kilograms
M = Metric tons	N = Cubic meters
- I. Enter the EPA 4 digit Hazardous Waste Number; if waste is a mixture of listed and characteristic wastes, the listed waste must be entered - other numbers should be listed in Section J. For nonhazardous special wastes, enter Class A. Enter the Illinois EPA six digit waste stream permit (authoriza-

tion) number for the waste stream (these numbers are specific for each waste stream and companies, and are obtained from the receiving facility) (leave blank for waste going out of Illinois).

- J, K. If needed, enter additional description or information/instructions for the material listed in Item 11.
15. If needed, indicate special transportation, treatment, storage, or disposal information, or Bill of Lading information. For international shipments generators must enter the point of departure (City and State) for shipments destined for treatment, storage, or disposal outside the jurisdiction of the United States in this space.
16. The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to highway is used, enter the appropriate additional mode.

**GENERATOR: RETAIN COPY 6. MAIL COPY 5 TO IEPA WITHIN 2 DAYS OF THE SHIPMENT IF WASTE IS HAZARDOUS.**

**INSTRUCTIONS TO TRANSPORTER:** 17, 18. The person accepting the waste on behalf of the transporter must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt. *Upon delivery of waste to facility, retain Copy 4 and leave remaining copies with the facility owner/operator.*

#### INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES:

19. The authorized representative of the designated (or alternate) facility's owner or operator must note in Item 19 any significant discrepancy (as defined in 35 Ill. Adm. Code 725.172) between the waste described on the Manifest and the waste actually received at the facility. Reference the discrepancy by line A, B, C, or D.
20. Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste by signing and entering the date of receipt.  
*Retain Copy 3, send Copy 1 to the generator, and send Copy 2 to Illinois EPA within 30 days of the delivery.*

*Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street SW., Washington, D.C. 20480; and the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.*





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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address U.S. EPA REGION II 77 W. JACKSON BLVD HSE-5J CHICAGO IL 60604		Location If Different 14752 SAULDRNG HARVEY IL 60429		A. Illinois Manifest Document Number IL 7148038 FEE PAID IF APPLICABLE		
4. "24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS" 1800800575		6. US EPA ID Number IND058484114		B. Illinois Generator's ID 0311113006		
5. Transporter 1 Company Name HERITAGE TRANSPORT		7. Transporter 2 Company Name		C. Illinois Transporter's ID 1554		
9. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SVCS, 15330 CANAL BANK RD LEMONT IL 60439		10. US EPA ID Number ILD085349264		D. Transporter's Phone 312-381-6848		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		E. Illinois Transporter's ID F. ( ) Transporter's Phone		
a. RQ. WASTE SULFAMIC ACID, 8, UN2967, PG. III (RQ0002) - ERG#154		No. Type		G. Illinois Facility's ID 0311620007		
b. RQ. WASTE, SULFAMIC ACID, 8, UN2967, PG. III (RQ0002) - ERG#154		13. Total Quantity 0.04 CF 00004 Y		H. Facility's Phone 630-739-1151		
c.		14. Unit W/Vol		I. Waste No.		
d.		15. Special Handling Instructions and Additional Information		J. Additional Description for Materials Listed Above WS#43421-3 11A) 4x3Y B) 19x55DF		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.		K. Handling Codes for Wastes Listed Above In Item #14 Job 10383 P.O. 79750		EPA HW Number XX10002 Authorization Number 000268		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Fred Bortman		Date 11/14/97		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature WJ Murray		Date 11/24/97		
19. Discrepancy Indication Space		Signature Mary Richards		Date 11/14/97		
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Signature Mary Richards		Date 11/14/97		

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2. Enter the total number of pages comprising this Manifest.
3. Enter generator's name and mailing address. If location of waste generation is different from mailing address, enter location to the right of mailing address.
4. Enter telephone number where an authorized agent of the generator, who has knowledge of the waste, may be reached in the event of an emergency.
- B. Enter the generator's Illinois EPA ten digit identification number.
- 5, 6. For the first transporter who will transport the waste, enter the company name, USEPA ID number, Illinois EPA four digit Special Waste Hauling (SWH) Permit number, and telephone number where an authorized agent of the transporter may be reached in the event of an emergency.
- 7, 8. If applicable, enter the information requested for the second transporter who will transport the waste.
- 9, 10. For the facility designated to receive the waste, enter company name, address, USEPA ID Number, Illinois EPA ten digit facility code number, and telephone number where an authorized agent of the receiving facility may be reached.
11. Enter the US DOT Proper Shipping Name, Hazard Class, and ID number (NA/UN number) for each waste as identified in 49 CFR 171 through 177. For wastes not regulated as Hazardous Materials by DOT, enter a description of the waste and the generic name of the waste, plus the phrase "not hazardous by DOT".
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 BA = Burlap, cloth, paper or plastic bags.  
 CY = Cylinders    TT = Tank trucks  
 DT = Dump trucks    TP = Tanks portable  
 TC = Tank cars
13. Enter the total quantity of each waste.
14. Enter unit of measure from list below:  
 G = Gallons    P = Pounds  
 T = Tons    Y = Cubic Yards  
 L = Liters    K = Kilograms  
 M = Metric tons    N = Cubic meters
- I. Enter the EPA 4 digit Hazardous Waste Number; if waste is a mixture of listed and characteristic wastes, the listed waste must be entered - other numbers should be listed in Section J. For nonhazardous special wastes, enter Class A. Enter the Illinois EPA six digit waste stream permit (authoriza-

tion) number for the waste stream (these numbers are specific for each waste stream and companies, and are obtained from the receiving facility) (leave blank for waste going out of Illinois).

- J, K. If needed, enter additional description or information/instructions for the material listed in Item 11.
15. If needed, indicate special transportation, treatment, storage, or disposal information, or Bill of Lading information. For international shipments generators must enter the point of departure (City and State) for shipments destined for treatment, storage, or disposal outside the jurisdiction of the United States in this space.
16. The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to highway is used, enter the appropriate additional mode.

**GENERATOR: RETAIN COPY 6. MAIL COPY 5 TO IEPA WITHIN 2 DAYS OF THE SHIPMENT IF WASTE IS HAZARDOUS.**

**INSTRUCTIONS TO TRANSPORTER:** 17, 18. The person accepting the waste on behalf of the transporter must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt. *Upon delivery of waste to facility, retain Copy 4 and leave remaining copies with the facility owner/operator.*

#### INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES:

19. The authorized representative of the designated (or alternate) facility's owner or operator must note in Item 19 any significant discrepancy (as defined in 35 Ill. Adm. Code 725.172) between the waste described on the Manifest and the waste actually received at the facility. Reference the discrepancy by line A, B, C, or D.
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I. 1  
11/13/97

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch typewriter).)

Form approved. OMB No. 2050-0039. Expires 9-30-95

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA No.

I.L.P. 2000-1-7-8400583

Manifest  
Document No.

2. Page 1  
of 1

Information in the shaded areas is  
not required by Federal law, but  
items D, F, H, I and K are required  
by State law.

3. Generator's Name and Mailing Address

U.S.E.P.A./Weltmeyer  
77 West Jackson Chicago, IL 60604

A. State Manifest Document Number

INA 1199065

4. Generator's Phone

312 886-4001

Attn: Fred Bartmann

B. State Generator's ID

14752 Spaulding Ave  
Harvey, IL 60426

5. Transporter 1 Company Name

Heritage Transport Inc

6. US EPA ID Number

I.ND 0584 84114

C. State Transporter's ID

15544

D. Transporter's Phone

317-681-6848

7. Transporter 2 Company Name

METROPOLITAN ENVIRONMENTAL

8. US EPA ID Number

I.N.T. 19.0.0.1.0397

E. State Transporter's ID

F. Transporter's Phone

800-324-9139

9. Designated Facility Name and Site Address

Heritage Environmental Services, Inc.  
7901 West Morris  
Indianapolis, IN 46231

10. US EPA ID Number

I.ND 0932.19012

G. State Facility's ID

9186970001

H. Facility's Phone

317-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol.

15. Waste No.

a. ~~RQ. Waste Hydrochloric Acid, 8, UN1789, PGII~~  
~~(D008) - 88~~

88

001

TT

G

88

0002

b. NON DOT / NON RCRA REGULATED  
(HCl/soil)

001

CM

0.0.0.1.0

Y

CLASS A

c.

d.

J. Additional Descriptions for Materials Listed Above

11a. 43421-11

K. Handling Codes for Wastes Listed Above

S82, T31

15. Special Handling Instructions and Additional Information

JAL #10393 PO# 78893

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

FRED BARTMAN

Signature

Fred Bartman

Date

Month Day Year  
11 13 97

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Loren Miller

Signature

Loren Miller

Date

Month Day Year  
11 13 97

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Loren Miller

Signature

Loren Miller

Date

Month Day Year  
11 13 97

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

DAVID RIGGERS

Signature

David Riggers

Date

Month Day Year  
11 14 97

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

GENERATOR

TRANSPORTER

FACILITY

INA 1199065



# INSTRUCTIONS TO GENERATORS (Please type or print clearly)

- (1) Enter generator's U.S. EPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g., 00001) by the generator.
- (2) Enter total number of pages comprising this Manifest.
- (3) Enter the generator's name and mailing address.
- (4) Enter telephone number where an authorized agent of the generator may be reached in event of an emergency.
- (5, 6) Enter company name and U.S. EPA I.D. number of the first transporter who will transport the waste.
- (7, 8) If applicable, enter company name and U.S. EPA I.D. number of the second transporter who will transport the waste. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA Form 8700-22A).
- (9, 10) Enter company name, site address, and U.S. EPA I.D. number of the facility designated to receive the waste listed on this Manifest.
- (11) Enter U.S. DOT Proper Shipping Name, Hazard Class, and I.D. number (UN/NA) for each waste as identified in 49 CFR 171 through 177. Note: If additional space is needed for waste descriptions, enter in Item 28 on the Continuation Sheet (EPA Form 8700-22A).
- (12) Enter number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Table I - Types of Containers

DM-Metal drums  
DW-Wooden drums  
DF-Fiberboard/plastic  
TP-Tanks portable

TT-Tank Trucks  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders

CM-Metal boxes (including roll-offs)  
CW-Wooden boxes  
CF-Fiber or plastic boxes  
BA-Bags

- (13) Enter total quantity of waste described on each line.
- (14) Enter appropriate abbreviation from Table II (below) for the unit of measure.

Table II - Units of Measure

P = Pounds  
K = Kilograms  
Y = Cubic yards  
N = Cubic meters

L = Liters (liquids only)  
G = Gallons (liquids only)  
T = Tons (2,000 lbs.)  
M = Metric tons (1,000 kg.)

- (16) The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below.

## THE FOLLOWING INFORMATION IN THE SHADED AREAS IS REQUIRED BY INDIANA STATE LAW

- (D) Enter the phone number of first transporter.
- (F) Enter the phone number of second transporter.
- (H) Enter the phone number of the designated facility.
- (J) Enter the appropriate EPA waste code.
- (K) Enter the handling code which reflects the ultimate disposition of the waste at the facility.

**GENERATOR IN STATE** Retain Copy 8 and detach and mail Copy 2 to Indiana D.E.M.

**GENERATOR OUT OF STATE:** Retain Copy 8 and mail Copy 2 to the Generator State (if applicable) and mail Copy 3 to Indiana D.E.M.

# INSTRUCTIONS TO TRANSPORTERS (Please type or print clearly)

- (17, 18) Enter name of person accepting the waste on behalf of the transporter. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**TRANSPORTER(S):** Retain Copy 7 (Copy 6) and leave remaining copies with FACILITY OWNER/OPERATOR.

# INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES (Please type or print clearly)

- (19) The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any discrepancy between the waste described on the Manifest and the waste actually received at the facility.
- (20) Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**OWNER/OPERATOR IN STATE:** Retain Copy 5, return Copy 4 to generator and mail Copy 1 to Indiana D.E.M.

**OWNER/OPERATOR OUT OF STATE:** Retain Copy 5, return Copy 4 to generator, mail Copy 1 to the TSD State (if applicable) and mail Copy 3 to Indiana D.E.M.

Indiana generators and TSD facilities must mail the required manifest copies to the State of Indiana within five (5) working days of shipment or receipt of the waste (IC 13-7-8.5-7).

Address all manifest copies:

Indiana Department of Environmental Management  
Office of Solid and Hazardous Waste Management  
P.O. Box 7035  
Indianapolis, IN 46207-7035  
Manifest Tracking Phone Number: (317) 232-7959

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Customer: 29 HERITAGE ENVIRONMENTAL SERVI  
Contact: ACCOUNTS PAYABLE (630)739-1151  
Number(s): 79683  
Location(s): 48-1



HERITAGE ENVIRONMENTAL SERVICES, INC.  
7901 WEST MORRIS STREET INDIANAPOLIS IN 46231  
(317)243-0811 http://www.heritage-enviro.com

Signature \_\_\_\_\_ Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

This is to certify that the materials listed below are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

FRED BARTMANN  
US EPA/WELTMEYER  
14752 SPAULDING  
HARVEY IL 60426

EPA ID: ILP200001784  
Phone: (800)500-0575  
GENERATOR: 43421 XX \*M\*

INTL  
LINER \_\_\_\_\_  
PUMP/HOSE \_\_\_\_\_  
DEMURRAGE \_\_\_\_\_  
EMER RATE \_\_\_\_\_

TRANSPORTER: 8029  
METROPOLITAN ENVIRONMENTAL, INC.

EPA ID: INT190010397  
Phone: (419)586-6638

DRIVER# \_\_\_\_\_ ROLLOFF# 405  
TRACTOR# \_\_\_\_\_ TRAILER# \_\_\_\_\_

Signature Loren Miller Name (please print) Loren Miller Date 11-15-97  
As transporter, I accept this material for transportation in accordance with all applicable regulations.

SDF: 9000  
HERITAGE ENVIRONMENTAL SERVICES, INC.  
7901 WEST MORRIS STREET  
INDIANAPOLIS IN 46231

EPA ID: IND093219012  
Phone: (317)243-0811  
Contact: WINDE HAMRICK

INTL  
DEMURRAGE \_\_\_\_\_

Signature Jay RALPH Name (please print) Jay RALPH Date 11-14-97  
As the receiving facility, I accept this material for treatment, storage or disposal in accordance with all applicable regulations.

Prod HES Doc Common Name	RCRA GenDoc State Manifest	Pg Ln	Ordered	Shipped	Received Qty
11 7 708284 HCL/SOIL	N INA1199065		Qty Unit	Quantity Unit	in TON
DOT : NON-DOT/NON-RCRA REGULATED			11 CM		8.27
IL Auth# N/A Tank: 51 Quote: 142403 Scale:			Gallons:		LBS: 16540

trip# 145161

Trailer \_\_\_\_\_ Est Total Miles 176 Act Total Miles \_\_\_\_\_

CONTAINER TYPES AND/OR QUANTITIES TO BE PICKED UP

11

SHIPMENT: 184384 No. of Containers: 1

Pickup Date: 14-NOV-1997 - 14-NOV-1997

Actual Date: \_\_\_\_\_ Actual Time: \_\_\_\_\_ Demurrage: \_\_\_\_\_

DDL EQUIP:

PE: GLVS, GOGLES, APRON OR PCTYVEK SUIT

pl Instrs: DT DLVY

MAIL TO GENERATOR





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EPA Form 8700-22 (Rev. 6-89)

Form Approved. OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 2	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address US EPA REGION V (HSE-5J) 77 W. JACKSON CHICAGO IL 60604		Location If Different 14752 SPAULDING HARVEY IL		A. Illinois Manifest Document Number IL 7148037 FEE PAID IF APPLICABLE		
4. *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS 1800 500 0755		6. US EPA ID Number IND038484114		B. Illinois Generator's ID 031111130006		
5. Transporter 1 Company Name HERITAGE TRANSPORT		8. US EPA ID Number		C. Illinois Transporter's ID 1554		
7. Transporter 2 Company Name		10. US EPA ID Number		D. (312) 3816848 Transporter's Phone		
9. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SVCS. CANAL BANK RD NE 15330 LEMONT IL 60439		12. Containers No. Type		E. Illinois Transporter's ID F. ( ) Transporter's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		13. Total Quantity		G. Illinois Facility's ID 031116200017		
a. WASTE, AEROSOLS, 2.1, UN1950 ERG# 126 0.0.1 DF 000005 P 000256		14. Unit Wt/Vol		H. Facility's Phone (630) 739 1151		
b. RQ, WASTE, PAINT RELATED MATERIAL, 3, UN 1263, PG II, (RQ0001) ERG# 127 0.0.2 DM 000070 G 000108		I. Waste No.		EPA HW Number XXD0001 Authorization Number 000108		
c. RQ, WASTE, FLAMMABLE LIQUID, N.O.S., 3, UN1993, PG II, (RQ0001) (PAINT/GREASE) ERG# 128 0.0.2 DM 000040 G 000108		EPA HW Number XXD0001 Authorization Number 000108				
d. RQ, WASTE, SULFAMIC ACID, 8, UN2967, PG II, (RQ0002) ERG# 154 0.1.8 DF 05000 P 000268		EPA HW Number XXD0002 Authorization Number 000268				
J. Additional Description for Materials Listed Above 11A)-12 1x5DF B)-2 2x85DM C)-13 2x55DM LOOSEPACK D)-3 18x55DF		K. Handling Codes for Wastes Listed Above In Item #14 JOB 10383 P.O. 79750				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, and disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name FRED BARTMAN		Signature Fred Bartman		Date 11/13/97		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name WILLIAM J MURRAY		Signature WJ Murray		Date 11/13/97		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name Marilyn Richardson		Signature Marilyn Richardson		Date 11/13/97		

This Agency is authorized to require, pursuant to Illinois Revised Statute, 1989, Chapter 111 1/2, Section 1004 and 1021, that this information be submitted to the Agency. Failure to provide this information may result in a civil penalty against the owner or operator not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.



*The Illinois Uniform Manifest must be used for all shipments of special waste (hazardous and nonhazardous) stored, disposed of, treated or reclaimed in Illinois; and for all shipments originating in Illinois and destined for states that do not print and supply the form. PIMW (Potentially Infectious Medical Waste) requires a different manifest. For shipments not originating in Illinois, if the generator's state requires copies of the manifest, a photocopy of part I should be used.*

#### INSTRUCTIONS TO GENERATORS (Please type)

1. Enter generator's USEPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g. 00001) by the generator.
2. Enter the total number of pages comprising this Manifest.
3. Enter generator's name and mailing address. If location of waste generation is different from mailing address, enter location to the right of mailing address.
4. Enter telephone number where an authorized agent of the generator, who has knowledge of the waste, may be reached in the event of an emergency.
- B. Enter the generator's Illinois EPA ten digit identification number.
- 5, 6. For the first transporter who will transport the waste, enter the
- C, D. company name, USEPA ID number, Illinois EPA four digit Special Waste Hauling (SWH) Permit number, and telephone number where an authorized agent of the transporter may be reached in the event of an emergency.
- 7, 8. If applicable, enter the information requested for the second
- E, F. transporter who will transport the waste.
- 9, 10. For the facility designated to receive the waste, enter company
- G, H. name, address, USEPA ID Number, Illinois EPA ten digit facility code number, and telephone number where an authorized agent of the receiving facility may be reached.
11. Enter the US DOT Proper Shipping Name, Hazard Class, and ID number (NA/UN number) for each waste as identified in 49 CFR 171 through 177. For wastes not regulated as Hazardous Materials by DOT, enter a description of the waste and the generic name of the waste, plus the phrase "not hazardous by DOT".
12. Enter the number of containers for each waste and the appropriate abbreviations for the type of container:  
 CM = Metal boxes or roll offs    DM = Metal drums  
 CW = Wooden boxes    DW = Wooden drums  
 CF = Fiberboard or plastic bags    DF = Fiberboard or plastic drums  
 BA = Burlap, cloth, paper or plastic bags.  
 CY = Cylinders    TT = Tank trucks  
 DT = Dump trucks    TP = Tanks portable  
 TC = Tank cars
13. Enter the total quantity of each waste.
14. Enter unit of measure from list below:  
 G = Gallons    P = Pounds  
 T = Tons    Y = Cubic Yards  
 L = Liters    K = Kilograms  
 M = Metric tons    N = Cubic meters
- I. Enter the EPA 4 digit Hazardous Waste Number; if waste is a mixture of listed and characteristic wastes, the listed waste must be entered - other numbers should be listed in Section J. For nonhazardous special wastes, enter Class A. Enter the Illinois EPA six digit waste stream permit (authoriza-

tion) number for the waste stream (these numbers are specific for each waste stream and companies, and are obtained from the receiving facility) (leave blank for waste going out of Illinois).

- J, K. If needed, enter additional description or information/instructions for the material listed in Item 11.
15. If needed, indicate special transportation, treatment, storage, or disposal information, or Bill of Lading information. For international shipments generators must enter the point of departure (City and State) for shipments destined for treatment, storage, or disposal outside the jurisdiction of the United States in this space.
16. The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to highway is used, enter the appropriate additional mode.

**GENERATOR: RETAIN COPY 6. MAIL COPY 5 TO IEPA WITHIN 2 DAYS OF THE SHIPMENT IF WASTE IS HAZARDOUS.**

**INSTRUCTIONS TO TRANSPORTER:** 17, 18. The person accepting the waste on behalf of the transporter must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt. *Upon delivery of waste to facility, retain Copy 4 and leave remaining copies with the facility owner/operator.*

#### INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES:

19. The authorized representative of the designated (or alternate) facility's owner or operator must note in Item 19 any significant discrepancy (as defined in 35 Ill. Adm. Code 725.172) between the waste described on the Manifest and the waste actually received at the facility. Reference the discrepancy by line A, B, C, or D.
20. Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste by signing and entering the date of receipt.  
*Retain Copy 3, send Copy 1 to the generator, and send Copy 2 to Illinois EPA within 30 days of the delivery.*

*Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street SW., Washington, D.C. 20480; and the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.*



<b>UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)</b>		21. Generator's US EPA ID No. <b>ILP20001784</b>	Manifest Document No. <b>48037</b>		22. Page <b>2 of 2</b>	Information in the shaded areas is not required by Federal law.	
23. Generator's Name <b>U.S. EPA</b>					L. State Manifest Document Number <b>IL 2148037</b>		
					M. State Generator's ID <b>031113006</b>		
24. Transporter Company Name		25. US EPA ID Number		N. State Transporter's ID			
				O. Transporter's Phone			
26. Transporter Company Name		27. US EPA ID Number		P. State Transporter's ID			
				Q. Transporter's Phone			
28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				29. Containers	30. Total	31. Unit	32. Waste No.
				No.	Quantity	Wt/Vol	
a.	<b>NON HAZARDOUS SPECIAL WASTE Solid (GREASE)</b>			<b>001</b>	<b>DM 400</b>	<b>P</b>	<b>CLASS 4 000331</b>
b.							
c.							
d.							
e.							
f.							
g.							
h.							
i.							
S. Additional Descriptions for Materials Listed Above <b>28A) - 10 1785 DM</b>				T. Handling Codes for Wastes Listed Above			
32. Special Handling Instructions and Additional Information							
33. Transporter Acknowledgement of Receipt of Materials				Date			
Printed/Typed Name			Signature	Month			Day Year
34. Transporter Acknowledgement of Receipt of Materials				Date			
Printed/Typed Name			Signature	Month			Day Year
35. Discrepancy Indication Space							





## SERVICE LOCATION

INDIANAPOLIS, IN

LOT CODE: 360951

STOP CODE: 181848

Miles: 176



CORPORATE HEADQUARTERS  
HERITAGE ENVIRONMENTAL SERVICES, INC.  
7901 WEST MORRIS STREET • INDIANAPOLIS, IN 46231  
TELEPHONE 317/243-0811

Internet: <http://www.heritage-enviro.com>

DOCUMENT NO.

703301

WASTESTREAM

43421-1

PICKUP DATE

27-OCT-97

QUOTE

141230

PICKUP TIME

N/A

GROUP CODE

143122

## SCALE WEIGHTS

## SPECIAL INSTRUCTIONS

## CUSTOMER

HERITAGE ENVIRONMENTAL SERVICES  
HERITAGE REMEDIATION  
15330 CANAL BANK RD.  
LEMONT, IL 60439  
CONTACT: BARRY LEGG EXT. 226 29

PURCHASE ORDER NO.

10383

RELEASE NO.

## WASTESTREAM COMMON NAME

HYDROCHLORIC ACID

PRODUCT

4

PRODUCT DESCRIPTION

WASTE ACID BULK

HAZARD TYPE

CHARACTERISTIC

## HAZARD CODES

D002

## PROCESS MATRIX CODE

## SYSTEM TYPE

(533-0) 802/T31/T23/T40/T21

## DOT DESCRIPTION

RD, WASTE HYDROCHLORIC ACID, 8, UN1789, PG II, ERG# 157

## PROTECTIVE EQUIPMENT REQUIRED

CHEM RES GLVS, CHEM GLOVES, R BOOTS, FACE SHLD, PCTYVEK SUIT, RESP-ACID CART

## ADDITIONAL EQUIPMENT REQUIRED

NO ADDITIONAL EQUIPMENT SPECIFIED

## PUMPING DRUMS ?

N

## SPECIAL INSTRUCTIONS

NO SPECIAL INSTRUCTIONS

LOADING ARRIVAL DEPARTURE	GENERATOR: 43421 JS EPA/WELTMEYER		EPA ID NO.: ILP200001784		ESTIMATED QUANTITY		UNIT		
	147752 SPAULDING HARVEY, IL 60426		FRED BARTHANN (800) 500-0875		HAZARDOUS MANIFEST NO.		TN-0933742		
	This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.				GENERATOR MANIFEST NO.		10277		
TRAVEL ARRIVAL DEPARTURE	SIGNATURE: _____		PRINT NAME: _____		DATE: _____		DRIVER		
	TRANSPORTER: 000 HERITAGE TRANSPORT, INC.		EPA ID NO.: IND058484114		TRACTOR		TRAILER		
	7901 WEST MORRIS STREET INDIANAPOLIS, IN 46231		(317) 381-6848		SPECIAL CHARGES		INITIALS		
UNLOADING ARRIVAL DEPARTURE	SIGNATURE: _____		PRINT NAME: _____		DATE: _____		EMERGENCY RATE: YES OR NO		
	TSD FACILITY: 0000 48 HERITAGE ENVIRONMENTAL SERVICES, INC.		EPA ID NO.: IND093219012		DEMURRAGE: MINUTES		LINER: NO. USED		
	7901 WEST MORRIS STREET INDIANAPOLIS, IN 46231		(317) 243-0811		HOSE USED: FEET		PUMPING: DRUMS		
SIGNATURE: _____		PRINT NAME: _____		DATE: _____		TSD WAITING: MINUTES		NET WEIGHT	
This is to certify the acceptance of this waste for treatment and or disposal in accordance with all applicable regulations.								NO. OF DRUMS	
								GROSS GALLONS	
								SCALE UNIT	
								SCALE VALUE	
								UNLOAD AUTH.	
								TANK CODE	
								LBS/GAL.	
								TSD CODE	

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBER: 1-800-827-5221

GENERATOR





LAND DISPOSAL RESTRICTIONS (LDR)  
NOTICE AND CERTIFICATION

Page 1 of 1  
10/27/97

Generator Name: US EPA/ Wetmorey 972  
Manifest Doc. No.: 10277

EPA I.D. No.: ILP200001784  
State Manifest No.: 1440433792

(1) Manifest Page/Line Item	(2) Hazardous Waste Code <sup>A</sup> (One per line)	(3) Waste Water <sup>B</sup>	(4) Non- Waste Water <sup>B</sup>	(5) Subcategory (if applicable) <sup>C</sup>	(6) Underlying Constituents? <sup>D</sup> (Circle one)	(7) Applicable Certification <sup>E</sup> (One per line)
1/114	11002			Manufactured Liquid System	Yes / No / NA	1
					Yes / No / NA	
					Yes / No / NA	
					Yes / No / NA	
					Yes / No / NA	
					Yes / No / NA	
					Yes / No / NA	

A To list additional waste codes complete a Heritage LDR Continuation Form (HESLDR2). Complete a Heritage Supplemental F001-F005 Spent Solvent/Underlying Constituents/F039 Leachate Form (HESLDR3) if one or more applicable waste codes are F001, F002, F003, F004, F005, or F039.  
B Must check one, either wastewater or non-wastewater.  
C Enter "NA" if no subcategory is applicable to the waste code (see back of HESLDR1 or 40 CFR 268.40).  
D If "Yes" is circled, complete Heritage Supplemental F001-F005 Spent Solvent/Underlying Constituents/F039 Leachate Form (HESLDR3). For F001-F005 or F039 wastes, circle "NA" and identify F001-F005 or F039 constituents on HESLDR3.  
E Choose from list of certifications below and enter number. Enter only one number per line. Enter date waste is subject to prohibition if Certification #3 applies.

- (1) Waste Does Not Meet Applicable Treatment Standards - This is a restricted waste that does not meet the applicable treatment standards set forth in Subpart D of 40 CFR Part 268, or exceeds the applicable prohibition levels set forth in 40 CFR 268.32 or RCRA Section 3004(d).
- (2) Waste Meets Applicable Treatment Standards - I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- (3) Waste Subject to Exemption - This waste is subject to an exemption from a prohibition, such as a case-by-case extension, an exemption, or a nationwide capacity variance. (Include date subject to LDR in Column 7)
- (4) Waste Treated to Applicable Treatment Standards (choose one):
- (4a) I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the performance levels specified in 40 CFR Part 268, Subpart D, and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA section 3004(d) without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- (4b) I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.42. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- (4c) I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and that, based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by incineration in units operated in accordance with 40 CFR Part 264, Subpart O or 40 CFR Part 265, Subpart O, or by combustion in fuel substitution units operating in accordance with applicable technical requirements, and I have been unable to detect the nonwastewater organic constituents despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- (5) Characteristic Waste Treated to Remove Characteristic (choose one):
- (5a) I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- (5b) I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in 268.2, have been treated on-site to meet the 268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- (6) Lab Pack Managed According to Alternative Treatment Standard at 40 CFR 268.42(c) (INCIN) - I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack does not contain any wastes identified at Appendix IV to Part 268. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.

I certify that the information provided on this and any additional pages (HESLDR2; HESLDR3) of this LDR notification is true, accurate and complete.

Authorized Signature: Fred Bartman  
Company/Title: US EPA/ Region 8  
Date: 10/27/97

Print or Type Name: FRED BARTMAN

Heritage does not warrant the acceptability of this form for any specific purpose, waste or treatment method and does not warrant that its use will constitute compliance with applicable law and expressly disclaims responsibility or liability, for any penalties, damages or other costs which may arise out of or be related to use of this document.



# USEPA HAZARDOUS WASTE CODES WITH SUBCATEGORIES

Refer to this table to determine the appropriate subcategory for Column 5 of HESLDR1 or HESLDR2 and to determine whether it is necessary to complete HESLDR3. If the waste code you entered in Column 2 of HESLDR1 or HESLDR2 is not in this table enter "NA" in Columns 5 and 6.

Waste Code		Underlying Constituents Required?	Subcategory
D001	1.1	Y	Ignitable characteristic wastes managed in non-CWA systems (except for the 40 CFR 261.21(a)(1) High TOC Subcategory)
	1.2	N	Ignitable characteristic wastes managed by incineration, fuels substitution, or organics recovery (except for the 40 CFR 261.21(a)(1) High TOC Subcategory)
	2	N	Ignitable characteristic wastes managed in CWA Systems (except for the 40 CFR 261.21(a)(1) High TOC Subcategory)
	3	N	High TOC Ignitable Characteristic Liquids Subcategory (based on 40 CFR 261.21(a)(1)-greater than or equal to 10% total organic carbon) (Note: This subcategory consists of nonwastewaters only)
D002	4	Y	Corrosive characteristic wastes managed in non-CWA systems
	5	N	Corrosive characteristic wastes managed in CWA systems
D003	6	N	Reactive Sulfides Subcategory (based on 40 CFR 261.23(a)(5))
	50	N	Unexploded ordnance and other explosive devices from an emergency response
	7	Y	Explosives Subcategory (based on 40 CFR 261.23(a)(6), (7) and (8))
	8	N	Other Reactives Subcategory (based on 40 CFR 261.23(a)(1))
	9	Y	Water Reactives Subcategory (based on 40 CFR 261.23(a)(2), (3) and (4)) (Note: This subcategory consists of nonwastewaters only)
	10	N	Reactive Cyanides Subcategory (based on 40 CFR 261.23(a)(5))
D006	11	N	Cadmium Containing Batteries Subcategory (Note: This subcategory consists of nonwastewaters only. For D006 wastes that do not fit this subcategory, enter "NA" in Column 5)
D008	12	N	Lead Acid Batteries Subcategory (Note: This subcategory consists of nonwastewaters only. For D008 wastes that do not fit this subcategory, enter "NA" in Column 5)
D009	13	N	High Mercury-Organic Subcategory (Nonwastewaters $\geq 260$ mg/kg total mercury containing organics that are not incinerator residues)
	14	N	High Mercury-Inorganic Subcategory ( Nonwastewaters $\geq 260$ mg/kg total mercury that are inorganic, including incinerator residues and residues from RMERC)
	15	N	Low Mercury Subcategory (Nonwastewaters < 260 mg/kg total mercury)
	16	N	All D009 wastewaters
D012-D043	48	Y	TC organic waste managed in non-CWA system
	49	N	TC organic waste managed in CWA system
F025	17	N	Light Ends Subcategory
	18	N	Spent Filters/Aids and Desiccants Subcategory
K006	19	N	Anhydrous
	20	N	Hydrated
K069	21	N	Calcium Sulfate (Low Lead) Subcategory
	22	N	Non-Calcium Sulfate (High Lead) Subcategory
K071	23	N	Nonwastewaters residues from RMERC
	24	N	Nonwastewaters not residues from RMERC
	25	N	All K071 wastewaters
K106	26	N	Nonwastewaters $\geq 260$ mg/kg total mercury
	27	N	Nonwastewaters < 260 mg/kg total mercury residues from RMERC
	28	N	Nonwastewaters < 260 mg/kg total mercury not residues from RMERC
	29	N	All K106 wastewaters
P047	30	N	4,6-Dinitro-o-cresol
	31	N	4,6-Dinitro-o-cresol salts
P065	32	N	Nonwastewaters, regardless of total mercury content, not incinerator residues and not residues from RMERC
	33	N	Nonwastewaters either incinerator residues or residues from RMERC; and $\geq 260$ mg/kg total mercury
	34	N	Nonwastewaters residues from RMERC and < 260 mg/kg total mercury
	35	N	Nonwastewaters incinerator residues and < 260 mg/kg total mercury
	36	N	All P065 wastewaters
P092	37	N	Nonwastewaters, regardless of total mercury content, not incinerator residues and not residues from RMERC
	38	N	Nonwastewaters either incinerator residues or residues from RMERC; and $\geq 260$ mg/kg total mercury
	39	N	Nonwastewaters residues from RMERC and < 260 mg/kg total mercury
	40	N	Nonwastewaters incinerator residues and < 260 mg/kg total mercury
	41	N	All P092 wastewaters
U151	42	N	Nonwastewaters $\geq 260$ mg/kg total mercury
	43	N	Nonwastewaters < 260 mg/kg total mercury and residues from RMERC
	44	N	Nonwastewaters < 260 mg/kg total mercury and not residues from RMERC
	45	N	All U151 wastewaters
U240	46	N	2,4-D
	47	N	2,4-D salts and esters





I. 1  
10127197

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA No.

Manifest  
Document No.

2. Page 1

Information in the shaded areas is  
not required by Federal law, but  
items D, F, H, I and K are required by  
State law.

ILP20000178410277

1 of 1

3. Generator's Name and Mailing Address

US EPA/Weltmeyer  
147752 Spaulding  
Harvey FL 33426

A. State Manifest Document Number

INA 0933742

4. Generator's Phone ( )

800 500-0575

B. State Generator's ID

5. Transporter 1 Company Name

Heritage Transport IN

6. US EPA ID Number

IND058484114

C. State Transporter's ID

D. Transporter's Phone 317-381-6848

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Heritage Environmental Services Inc.  
7901 West Morris Street  
Indianapolis IN 46231

10. US EPA ID Number

IND093219012

G. State Facility's ID

H. Facility's Phone

317-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total  
Quantity

14. Total  
Wt/Vol.

I. Waste No.

a R.O. waste Hydrochloric Acid, 8,  
UN 1789, PG II, ERG 157

001 TT 02000 G D002.

b

c

d

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

T-21

15. Special Handling Instructions and Additional Information

24 HR. Emergency Phone  
800-500-0575

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

FRED BARTMAN

Signature

Fred Bartman

Date

Month Day Year

10 27 97

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

LARRY HAMMER

Signature

Larry Hammer

Date

Month Day Year

10 27 97

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name

Signature

Date

Month Day Year



### INSTRUCTIONS TO GENERATORS (Please type or print clearly)

- (1) Enter **generator's** U.S. EPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g., 00001) by the generator.
- (2) Enter total number of pages comprising this Manifest.
- (3) Enter **generator's** name and mailing address.
- (4) Enter telephone number where an authorized agent of the **generator** may be reached in event of an emergency.
- (5, 6) Enter company name and U.S. EPA I.D. number of the first **transporter** who will transport the waste.
- (7, 8) If applicable, enter company name and U.S. EPA I.D. number of the second **transporter** who will transport the waste. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA Form 8700-22A).
- (9, 10) Enter company name, **site** address, and U.S. EPA I.D. number of the **facility** designated to receive the waste listed on this Manifest.
- (11) Enter U.S. DOT Proper Shipping Name, Hazard Class, and I.D. number (UN/NA) for each waste as identified in 49 CFR 171 through 177. Note: If additional space is needed for waste descriptions, enter in Item 28 on the Continuation Sheet (EPA Form 8700-22A).
- (12) Enter number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Table I - Types of Containers

DM-Metal drums	TT-Tank Trucks	CM-Metal boxes (including roll-offs)
DW-Wooden drums	TC-Tank cars	CW-Wooden boxes
DF-Fiberboard/plastic	DT-Dump truck	CF-Fiber or plastic boxes
TP-Tanks portable	CY-Cylinders	BA-Bags

- (13) Enter total quantity of waste described on each line.
- (14) Enter appropriate abbreviation from Table II (below) for the unit of measure.

Table II - Units of Measure

P = Pounds	L = Liters (liquids only)
K = Kilograms	G = Gallons (liquids only)
Y = Cubic yards	T = Tons (2,000 lbs.)
N = Cubic meters	M = Metric tons (1,000 kg.)

- (16) The **generator** must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below.

### THE FOLLOWING INFORMATION IN THE SHADED AREAS IS REQUIRED BY INDIANA STATE LAW

- (D) Enter the phone number of **first transporter**.
- (F) Enter the phone number of **second transporter** (if applicable).
- (H) Enter the phone number of the designated facility.
- (I) Enter the most appropriate EPA waste code.
- (K) Enter the handling code which reflects the ultimate disposition of the waste at the facility.

**GENERATOR IN STATE** Retain **Copy 8** and detach and mail **Copy 2** to Indiana D.E.M.

**GENERATOR OUT OF STATE:** Retain **Copy 8** and mail **Copy 2** to the Generator State (if applicable) and mail **Copy 3** to Indiana D.E.M.

### INSTRUCTIONS TO TRANSPORTERS (Please type or print clearly)

- (17, 18) Enter name of the person accepting the waste on behalf of the **transporter**. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**TRANSPORTER(S):** Retain **Copy 7 (Copy 6)** and leave remaining copies with **FACILITY OWNER/OPERATOR**.

### INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES (Please type or print clearly)

- (19) The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any discrepancy between the waste described on the Manifest and the waste actually received at the facility.
- (20) Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**OWNER/OPERATOR IN STATE:** Retain **Copy 5**, return **Copy 4** to generator and mail **Copy 1** to Indiana D.E.M.

**OWNER/OPERATOR OUT OF STATE:** Retain **Copy 5**, return **Copy 4** to generator, mail **Copy 1** to the TSD State (if applicable) and mail **Copy 3** to Indiana D.E.M.

Indiana generators and TSD facilities must mail the required manifest copies to the State of Indiana within five (5) working days of shipment or receipt of the waste (IC 13-7-8.5-7).

Address all manifest copies:

Indiana Department of Environmental Management  
Office of Solid and Hazardous Waste Management  
P.O. Box 7035  
Indianapolis, IN 46207-7035  
Manifest Tracking Phone Number: (317)232-7959

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M. St., SW., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.





I.1  
10/27/97

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA No.

ILP200001784

Manifest  
Document No.

10277

2. Page 1

1 of 1

Information in the shaded areas is  
not required by Federal law, but  
items D, F, H, I and K are required by  
State law.

3. Generator's Name and Mailing Address

US EPA/weitmeyer  
147752 Spaulding  
Harvey EL 60426

A. State Manifest Document Number

INA 0933742

B. State Generator's ID

4. Generator's Phone ( )

500 500-0575

5. Transporter 1 Company Name

Heritage Transport IN

6. US EPA ID Number

IND-055484114

C. State Transporter's ID

D. Transporter's Phone 317-381-6845

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Heritage Environmental Services INC.  
7901 West Morris Street  
Indianapolis IN 46231

10. US EPA ID Number

IND-093219012

G. State Facility's ID

H. Facility's Phone

317-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a R.O. waste Hydrochloric Acid, 8,  
UN 1789, PG II, ERG 157

12. Containers

No. Type

001 TT 02000 G

13.  
Total  
Quantity

14.  
Total  
Wt/Vol.

I.  
Waste No.

D002

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

T-21

15. Special Handling Instructions and Additional Information

24 HR. Emergency Phone  
800-500-0575

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

FRED BARTMAN

Signature

Fred Bartman

Month Date Year

10 27 97

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

LARRY HAMMER

Signature

Larry Hammer

Month Date Year

10 27 97

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Date Year

.

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name

Signature

Month Date Year

.

INA 0933742



### INSTRUCTIONS TO GENERATORS (Please type or print clearly)

- (1) Enter **generator's** U.S. EPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g., 00001) by the generator.
- (2) Enter total number of pages comprising this Manifest.
- (3) Enter **generator's** name and mailing address.
- (4) Enter telephone number where an authorized agent of the **generator** may be reached in event of an emergency.
- (5, 6) Enter company name and U.S. EPA I.D. number of the first **transporter** who will transport the waste.
- (7, 8) If applicable, enter company name and U.S. EPA I.D. number of the second **transporter** who will transport the waste. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA Form 8700-22A).
- (9, 10) Enter company name, **site** address, and U.S. EPA I.D. number of the **facility** designated to receive the waste listed on this Manifest.
- (11) Enter U.S. DOT Proper Shipping Name, Hazard Class, and I.D. number (UN/NA) for each waste as identified in 49 CFR 171 through 177. Note: If additional space is needed for waste descriptions, enter in Item 28 on the Continuation Sheet (EPA Form 8700-22A).
- (12) Enter number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Table I - Types of Containers

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DW-Wooden drums	TC-Tank cars	CW-Wooden boxes
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Table II - Units of Measure

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K = Kilograms	G = Gallons (liquids only)
Y = Cubic yards	T = Tons (2,000 lbs.)
N = Cubic meters	M = Metric tons (1,000 kg.)

- (16) The **generator** must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below.

### THE FOLLOWING INFORMATION IN THE SHADED AREAS IS REQUIRED BY INDIANA STATE LAW

- (D) Enter the phone number of **first transporter**.
- (F) Enter the phone number of **second transporter** (if applicable).
- (H) Enter the phone number of the designated facility.
- (I) Enter the most appropriate EPA waste code.
- (K) Enter the handling code which reflects the ultimate disposition of the waste at the facility.

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**TRANSPORTER(S):** Retain **Copy 7 (Copy 6)** and leave remaining copies with **FACILITY OWNER/OPERATOR**.

### INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES (Please type or print clearly)

- (19) The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any discrepancy between the waste described on the Manifest and the waste actually received at the facility.
- (20) Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**OWNER/OPERATOR IN STATE:** Retain **Copy 5**, return **Copy 4** to generator and mail **Copy 1** to Indiana D.E.M.

**OWNER/OPERATOR OUT OF STATE:** Retain **Copy 5**, return **Copy 4** to generator, mail **Copy 1** to the TSD State (if applicable) and mail **Copy 3** to Indiana D.E.M.

Indiana generators and TSD facilities must mail the required manifest copies to the State of Indiana within five (5) working days of shipment or receipt of the waste (IC 13-7-8.5-7).

Address all manifest copies:

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Office of Solid and Hazardous Waste Management  
P.O. Box 7035  
Indianapolis, IN 46207-7035  
Manifest Tracking Phone Number: (317)232-7959

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M. St., SW., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.





WASTE MANAGEMENT DIVISION  
MICHIGAN DEPARTMENT OF  
ENVIRONMENTAL QUALITY

DO NOT WRITE IN THIS SPACE  
ATT. ☐ DIS. ☐ REJ. ☐ PR. ☐

Required under authority of Part 111 and  
Part 121 of Act 451, 1994, as amended.

Failure to file may subject you to  
criminal and/or civil penalties under  
Sections 324.11151 or 324.12116 MCL.

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ILR00006821399001		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address USEPA Region 5 - Lennon Residence 77 W. Jackson Blvd. Chicago, IL 60604 Attn.: Fred Bartman						A. State Manifest Document Number MI 7383894									
4. Generator's Phone ( 312 ) 353-2318						B. State Generator's ID									
5. Transporter 1 Company Name SET Environmental						C. State Transporter's ID W238713X									
6. US EPA ID Number ILD981957236						D. Transporter's Phone 847-537-7221									
7. Transporter 2 Company Name SET Environmental						E. State Transporter's ID									
8. US EPA ID Number ILD981957236						F. Transporter's Phone									
9. Designated Facility Name and Site Address Michigan Disposal Waste Treatment Plant 49350 N. I-94 Service Drive Belleville, MI 48111						G. State Facility's ID									
10. US EPA ID Number MID000072483						H. Facility's Phone 800-592-5489									
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID NUMBER) HM RQ Hazardous Waste Solid, NOS, 9, NA3077, PG III (D009/Mercury)						12. Containers No. Type 0 0 2 D M		13. Total Quantity 0 0 4 0 0 R P		14. Unit Wt/Vol		I. Waste No. D009			
J. Additional Descriptions for Materials Listed Above												K. Handling Codes			
11a. Approval # 101999EO												Site Address: 1440 S. West St., Freeport, IL		a	
														b	
														c	
														d	
15. Special Handling Instructions and Additional Information EMERGENCY: 312-353-2318 USEPA Region 5 ERG 171															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR; if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name Fred Bartman												Signature [Signature]		Date 10/25/11	
17. Transporter 1 Acknowledgement of Receipt of Materials												Date 10/25/11			
Printed/Typed Name John E Garski												Signature [Signature]		Date 10/25/11	
18. Transporter 2 Acknowledgement of Receipt of Materials												Date 11/15/11			
Printed/Typed Name Wayne Kresul												Signature [Signature]		Date 11/15/11	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name [Signature]												Signature [Signature]		Date 11/15/11	

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-292-4706 OR OUT OF STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.



## GENERAL INSTRUCTIONS

Read all instructions before completing this form. This form has been designed for use on a 12-pitch (elite) typewriter/computer printer; a firm point pen may also be used - press down hard. Ensure all copies are legible.

Federal and state regulations require generators and transporters of hazardous waste and owners or operators of hazardous waste treatment, storage, and disposal facilities to use this form (8700-22) and, if necessary, the continuation sheet (Form 8700-22A) for both inter- and intrastate transportation of hazardous waste as defined in 40 CFR and Part 111 of Act 451 of 1984, as amended (Part 111). State regulations also require the use of this manifest for all regulated shipments of liquid industrial waste as required in Part 121 of Act 451 of 1984, as amended (Part 121).

Federal and State regulations provide for additional requirements, not included in these instructions, regarding the use and management of this form (40 CFR, 49 CFR, Part 111, Part 121).

Additional information such as "Rejected Load Procedures", state assigned identification numbers, manifest forms, etc., can be obtained by contacting the Michigan Department of Environmental Quality (MDEQ), Waste Management Division (WMD) Internet Home Page at: <http://www.deq.state.mi.us/wmd> or you may contact the Manifest Unit directly at (517) 373-1217. Continuation sheets are not supplied by MDEQ.

Complete all items on the manifest. Enter "N/A" if any item does not apply. Leave items that may be needed later blank, such as second transporter.

**Item 1:** Enter the generator's U.S. EPA twelve digit identification number. For Part 121 manifested shipments where a generator does not have a U.S. EPA assigned number, a state assigned number must be obtained and used. The generator of the waste must enter a unique five digit manifest document number (e.g. 00001).

**Item 2:** Page number 1 of 1 should be recorded unless a continuation sheet is used, in which case the total number of pages, counting the initial manifest page, should be shown.

**Item 3:** Enter the name of the generator and the mailing address to which the manifest should be mailed. If the address of the site at which the waste was placed into transportation is different from the mailing address, record the site address in Item J.

**Item 4:** Enter a telephone number (including area code) where an authorized agent of the generator can be reached in the event of an emergency and/or a partial or total rejected load.

**NOTE:** The 24 hour emergency phone number required for a hazardous materials shipping paper may be different from the generator's phone number.

**Item 5:** Enter the company name of the first transporter who will transport the waste.

**Item 6:** Enter the transporter's U.S. EPA twelve digit identification number. For Part 121 manifested shipments where a transporter does not have a U.S. EPA assigned number, a state assigned number is to be used.

**Item 7:** If using a second transporter, enter the company name.

**Item 8:** Enter the second transporter's U.S. EPA twelve digit identification number. For Part 121 manifested shipments where a transporter does not have a U.S. EPA assigned number, a state assigned number is to be used.

**NOTE:** If more than two transporters are used, the generator or third transporter shall initiate a continuation sheet. In Item L of the continuation sheet, the generator/transporter must copy the State manifest document number listed in Item A. Every transport company used between the generator and the designated facility (except for intermediate rail or barge transporters used between the initial rail or barge carriers and the designated facility) must be listed. This is not intended to require multiple signatures for individual drivers working for one transporter. Item 2 is to be changed to reflect the added pages. Continuation sheets must be appropriately completed in their entirety and properly distributed. Continuation sheets may not be used to list additional waste streams.

**Item 9:** Enter the company name and site address of the facility designated to receive the waste listed on this manifest.

**Item 10:** Enter the U.S. EPA twelve digit identification number for the designated facility described in Item 9. For Part 121 manifested shipments where a designated facility does not have a U.S. EPA assigned number, a state assigned number is to be used.

**Item 11:** Enter an "X" in the HM box if the waste is a hazardous material regulated by U.S. DOT. (See 49 CFR 172). Enter the required U.S. DOT shipping description, including Proper Shipping Name, Hazard Class or Division, ID Number, (UN/NA), and packing group for each waste as identified in 49 CFR 172. Additional information may also be required in this space, including technical name and reportable quantity references. For only Part 121 regulated wastes include an appropriate shipping description for the waste stream.

**Item 12:** Enter the number of containers for each waste and the appropriate abbreviations listed below for the type of container. Each container type requires separate entry.

DM = Metal drums, barrels, kegs	CY = Cylinders
DW = Wooden drums, barrels, kegs	CM = Metal boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	(including roll-offs)
DT = Dump truck	CW = Wooden boxes, cartons, cases
TP = Tanks, portable	CF = Fiber or plastic boxes, cartons, cases
TT = Cargo tanks (tank trucks)	BA = Burlap, cloth, paper / plastic bags
TC = Tank cars	

**Item 13:** Enter the total quantity of waste described on each line. Do not use decimals or fractions.

**Item 14:** Enter the appropriate abbreviation for the unit of measure listed below.

G = Gallons (liquids only)	L = Liters (liquids only)
P = Pounds	K = Kilograms
T = Tons (2000 lbs.)	M = Metric tons (1000 kg)
Y = Cubic yards	N = Cubic meters

**Item 15:** The generator may use this space to indicate special transportation, treatment, storage or disposal information. Import/Export information as noted in the "International Shipments" instructions section is to be recorded here.

**Item 16:** The generator must read, print his/her name, sign and date the certification statement.

**Item 17:** Print the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

**Item 18:** If applicable, print the name of the person accepting the waste on behalf of the second transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

**Item 19:** An authorized representative of the designated (or alternate) facility must note in this space any discrepancy in the waste shipment.

**Item 20:** Print the name of the person accepting the waste on behalf of the designated facility. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.

**NOTE:** MDEQ "Rejected Load Procedures" provides guidance for partial or total load rejections.

Only the following information in the shaded area is a State of Michigan requirement:

**Item A:** A preprinted State manifest document number.

**Item B - H:** May be required by other states.

**Item I:** For hazardous wastes, enter the appropriate waste numbers found in R299.9212 through R299.9214 of Part 111 and 40 CFR 261 Subparts C and D. If more than one waste number is required to appropriately identify the waste, enter the additional numbers in Item J. In selecting the most appropriate waste number, the following hierarchy must be used: acute waste (including P and acute F), U (toxic), K (specific sources), non-acute F (non-specific sources) and D (characteristic). State regulated wastes follow the same hierarchy as federally regulated wastes. For Part 121 wastes which are not hazardous wastes, enter the appropriate code listed below.

Mixed Solvents	007L
Pharmaceutical	014L
Crankcase Oil	017L
Coolants and Water Soluble Oils	019L
Other Oil (Describe in Item 11 or Item J)	021L
Brine	022L
PCB	026L
Other wastes (Describe in Item 11 or Item J)	029L
Antifreeze	030L

**Item J:** Generators are to use this space for the site address if different from the mailing address noted in Item 3, additional waste codes, additional description for a Part 121 waste as noted in Item I of these instructions, approval of commingling authority as required in R299.9304(6).

**Item K:** List any specific codes which apply.

Burned for Energy Recovery	B
Conditionally Exempt Small Quantity Generator	C
Emergency Response Cleanup	E
Household Generated	H
Recycled Precious Metals	P
Recycled, Reclaimed, Used or Reused	R
Universal Waste	U

### INTERNATIONAL SHIPMENTS

**Exports:** Transporters must sign and enter the date the waste leaves the United States in Item 15. The primary exporter must identify the point of departure from the United States.

**Imports:** Shipments of hazardous and Part 121 regulated wastes must be accompanied by a U.S. EPA Uniform Hazardous Waste Manifest. Any person functioning as the U.S. importer, as defined in Part 111, must complete the manifest as required in R299.9310.

Transporters of hazardous waste shipments must deliver a copy of the manifest to U.S. Customs when importing or exporting the waste across U.S. borders. Record the foreign waste manifest document number in Item 15.

### MANIFEST DISTRIBUTION

**GENERATOR:** Upon placing the waste into transportation (first transporter signs and dates manifest) remove the white and gold banded copies and give the remainder of the manifest copies to the transporter. Send the white copy to MDEQ no later than the tenth day of the month following the shipment. For shipments of wastes being transported to a designated facility outside of Michigan when an out-of-state manifest is used, mail to the MDEQ a photocopy of the manifest when the shipment is placed into transportation and mail a photocopy of the second generator manifest copy when received.

**TRANSPORTER:** Upon delivery to the designated (or alternate) facility, and that facility signs and dates the manifest, the canary banded copy will be returned to you. If more than one transporter is used, the manifest is to be copied and supplied to the previous transporter acknowledging the receipt of the shipment by the next transporter. The canary banded copy stays with the manifest until the shipment reaches the designated facility.

**DESIGNATED FACILITY:** Upon signing and dating the manifest as received, give the canary banded copy to the transporter. Return the blue banded copy to the generator. Mail the pink banded copy to the MDEQ no later than the 10th day of the month following receipt of shipment.

### ADDRESS ALL MDEQ MANIFEST COPIES TO:

**WASTE MANAGEMENT DIVISION  
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
PO BOX 30038  
LANSING MI 48909-7538**

The public reporting burden for this collection of information is estimated to average 31 minutes for generators, 18 minutes for transporters, and 16 minutes for treatment, storage and disposal facilities. The record keeping burden per response for this collection of information is estimated to average 6 minutes for generators, 6 minutes for transporters, and 6 minutes for treatment, storage and disposal facilities. The burden associated with reading the regulations is estimated at 1 hour and 15 minutes annually. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15. Send comments regarding these burden statements or any other aspect of this collection of information, including suggestions for reducing the burden, including through use of automated collection techniques to the Director, OPPE Regulatory Information Division, U.S. Environmental Protection Agency (237), 401 M St. S.W., Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Attention: Desk Officer for EPA, 725 17th Street, N.W., Washington, D.C. 20503. Include the OMB control number in any correspondence.



## SERVICE LOCATION

INDIANAPOLIS, IN

LOT CODE: 360844

STOP CODE: 181749

Miles: 176



CORPORATE HEADQUARTERS  
HERITAGE ENVIRONMENTAL SERVICES, INC.  
7901 WEST MORRIS STREET • INDIANAPOLIS, IN 46231  
TELEPHONE 317/243-0811

Internet: <http://www.heritage-enviro.com>

DOCUMENT NO.

WASTESTREAM

703102

43421-1

PICKUP DATE

QUOTE

24-OCT-97

141250

PICKUP TIME

GROUP CODE

N/A

143110

## SCALE WEIGHTS

## SPECIAL INSTRUCTIONS

## CUSTOMER

02:23 PM 10 25 97 71960

07:57 PM 10 25 97 67620

08:37 PM 10 25 97 28680

HERITAGE ENVIRONMENTAL SERVICES  
HERITAGE REMEDIATION  
15330 CANAL BANK RD.  
LEMONT, IL 60439  
CONTACT: BARRY LEGG EXT. 226 29

PURCHASE ORDER NO.

RELEASE NO.

BRUCE P

## WASTESTREAM COMMON NAME

HYDROCHLORIC ACID

PRODUCT

PRODUCT DESCRIPTION

HAZARD TYPE

4

WASTE ACID BULK

CHARACTERISTIC

## HAZARD CODES

D002

## SYSTEM TYPE

(533-D) S02/T31/T23/T40/T21

## DOT DESCRIPTION

RQ, WASTE HYDROCHLORIC ACID, 8, UN1789, PG II, ERG# 157

## PROTECTIVE EQUIPMENT REQUIRED

CHEM RES GLVS, CHEM GLOLS, R BOOTS, FACE SHLD, PCTYVEK SUIT, RESP-ACID CART

## ADDITIONAL EQUIPMENT REQUIRED

PUMPING DRUMS ?

NO ADDITIONAL EQUIPMENT SPECIFIED

N

## SPECIAL INSTRUCTIONS

NO SPECIAL INSTRUCTIONS

L  
O  
A  
D  
I  
N  
G  
ARRIVAL  
GENERATOR: 43421  
US EPA/WELTMEYER  
EPA ID NO.: ILP200001784  
147752 SPAULDING  
HARVEY, IL 60426  
FRED BARTMANN  
(800)500-0575  
This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SIGNATURE: *Fred Bartmann* PRINT NAME: *Fred Bartmann* DATE: *10/25/97*  
TRANSPORTER: 0000  
HERITAGE TRANSPORT, INC.  
EPA ID NO.: IND058484114

T  
R  
A  
V  
E  
L  
ARRIVAL  
7901 WEST MORRIS STREET  
INDIANAPOLIS, IN 46231  
(317)381-6848  
This is to certify acceptance of this waste for transportation. Carrier certifies that the equipment supplied for this shipment is a proper container for the transportation of this commodity.

SIGNATURE: *Paul Reel* PRINT NAME: *Paul Reel* DATE: *10/25/97*  
TSD FACILITY: 0000 48  
HERITAGE ENVIRONMENTAL SERVICES, INC.  
EPA ID NO.: IND093219012

U  
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ARRIVAL  
7901 WEST MORRIS STREET  
INDIANAPOLIS, IN 46231  
(317)243-0811  
This is to certify the acceptance of this waste for treatment and or disposal in accordance with all applicable regulations.

SIGNATURE: *Ed Stuckey* PRINT NAME: *ED STUCKEY* DATE: *10/25/97*

## ESTIMATED QUANTITY

## UNIT

4500

G

## HAZARDOUS MANIFEST NO.

1199063

## GENERATOR MANIFEST NO.

10383

## DRIVER

## TRACTOR

## TRAILER

1598

197

12-12

## SPECIAL CHARGES

## INITIALS

EMERGENCY RATE: YES OR NO

DEMURRAGE: 90 MINUTES

LINER: NO. USED

HOSE USED: 120 FEET

PUMPING: DRUMS

TSD WAITING: MINUTES

## NET WEIGHT

## NO. OF DRUMS

19.47

## GROSS GALLONS

## NET GALLONS

3578

## SCALE UNIT

## SCALE VALUE

28 % ACIDITY

## UNLOAD AUTH.

## TANK CODE

## LBS/GAL.

## TSD CODE

10.884

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBER: 1-800-827-5221

MAIL TO GENERATOR





PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch typewriter).)

Form approved. OMB No. 2050-0039. Expires 9-30-95

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA No.

Manifest  
Document No.

2. Page 1  
of 1

Information in the shaded areas is  
not required by Federal law, but  
items D, F, H, I and K are required  
by State law.

3. Generator's Name and Mailing Address

USEPA/Welthner  
77 W. Jackson Blvd Chicago, IL 60604

A. State Manifest Document Number

INA 1199063

4. Generator's Phone

312 353-2318 Attn: Fred Bartman

B. State Generator's ID

4158 Spaulding Ave  
Harvey, IL 60426

5. Transporter 1 Company Name

Heritage Transport Inc

6. US EPA ID Number

IND058484114

C. State Transporter's ID

1554

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Heritage Environmental Services, Inc  
7901 West Morris  
Indianapolis, IN 46251

10. US EPA ID Number

IND093219012

G. State Facility's ID

9180970001

H. Facility's Phone

317-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a R.O. Waste Hydrochloric Acid, 8,  
UN1789 PG II (D002)

12. Containers

No.

Type

13. Total  
Quantity

14. Unit  
Wt/Vol.

I. Waste No.

001 TT

03578  
04500

G

D002

J. Additional Descriptions for Materials Listed Above

11a 43421-1

K. Handling Codes for Wastes Listed Above

502, #1  
T21 EGS  
10-25-97

15. Special Handling Instructions and Additional Information

W.O.#10383 P.O.#79593  
DOT 9166

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Date

FRED BARTMAN

Fred Bartman

Month Day Year  
10 25 97

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

DAVID ZEELIN

Del Zeel

Month Day Year  
10 25 97

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date

Month Day Year

19. Discrepancy Indication Space

Volume discrepancy confirmed with Barry Ugg / Fred Bartmann  
10/28/97 GW.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

Signature

Date

ED STUCKEY

Ed Stuckey

Month Day Year  
10 25 97

GENERATOR

TRANSPORTER

FACILITY

INA 1199063



**INSTRUCTIONS TO GENERATORS** (Please type or print clearly)

- (1) Enter **generator's** U.S. EPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g., 00001) by the generator.
- (2) Enter total number of pages comprising this Manifest.
- (3) Enter the **generator's** name and mailing address.
- (4) Enter telephone number where an authorized agent of the **generator** may be reached in event of an emergency.
- (5, 6) Enter company name and U.S. EPA I.D. number of the first **transporter** who will transport the waste.
- (7, 8) If applicable, enter company name and U.S. EPA I.D. number of the second **transporter** who will transport the waste. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA Form 8700-22A).
- (9, 10) Enter company name, **site** address, and U.S. EPA I.D. number of the **facility** designated to receive the waste listed on this Manifest.
- (11) Enter U.S. DOT Proper Shipping Name, Hazard Class, and I.D. number (UN/NA) for each waste as identified in 49 CFR 171 through 177. Note: If additional space is needed for waste descriptions, enter in Item 28 on the Continuation Sheet (EPA Form 8700-22A).
- (12) Enter number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Table I - Types of Containers

DM-Metal drums  
DW-Wooden drums  
DF-Fiberboard/plastic  
TP-Tanks portable

TT-Tank Trucks  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders

CM-Metal boxes (including roll-offs)  
CW-Wooden boxes  
CF-Fiber or plastic boxes  
BA-Bags

- (13) Enter total quantity of waste described on each line.
- (14) Enter appropriate abbreviation from Table II (below) for the unit of measure.

Table II - Units of Measure

P = Pounds  
K = Kilograms  
Y = Cubic yards  
N = Cubic meters

L = Liters (liquids only)  
G = Gallons (liquids only)  
T = Tons (2,000 lbs.)  
M = Metric tons (1,000 kg.)

- (16) The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below.

**THE FOLLOWING INFORMATION IN THE SHADED AREAS IS REQUIRED BY INDIANA STATE LAW**

- (D) Enter the phone number of **first transporter**.
- (E) Enter the phone number of **second transporter**.
- (H) Enter the phone number of the designated facility.
- (I) Enter the appropriate EPA waste code.
- (K) Enter the handling code which reflects the ultimate disposition of the waste at the facility.

**GENERATOR IN STATE** Retain **Copy 8** and detach and mail **Copy 2** to Indiana D.E.M.

**GENERATOR OUT OF STATE:** Retain **Copy 8** and mail **Copy 2** to the Generator State (if applicable) and mail **Copy 3** to Indiana D.E.M.

**INSTRUCTIONS TO TRANSPORTERS** (Please type or print clearly)

- (17, 18) Enter name of person accepting the waste on behalf of the **transporter**. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**TRANSPORTER(S):** Retain **Copy 7** (**Copy 6**) and leave remaining copies with **FACILITY OWNER/OPERATOR**.

**INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES** (Please type or print clearly)

- (19) The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any discrepancy between the waste described on the Manifest and the waste actually received at the facility.
- (20) Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**OWNER/OPERATOR IN STATE:** Retain **Copy 5**, return **Copy 4** to generator and mail **Copy 1** to Indiana D.E.M.

**OWNER/OPERATOR OUT OF STATE:** Retain **Copy 5**, return **Copy 4** to generator, mail **Copy 1** to the TSD State (if applicable) and mail **Copy 3** to Indiana D.E.M.

Indiana generators and TSD facilities must mail the required manifest copies to the State of Indiana within five (5) working days of shipment or receipt of the waste (IC 13-7-8.5-7).

Address all manifest copies:

Indiana Department of Environmental Management  
Office of Solid and Hazardous Waste Management  
P.O. Box 7035  
Indianapolis, IN 46207-7035  
Manifest Tracking Phone Number: (317) 232-7959

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M. St., SW., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.



## SERVICE LOCATION

INDIANAPOLIS, IN

LOT CODE: 360845

STOP CODE: 181750

Miles: 176



CORPORATE HEADQUARTERS  
HERITAGE ENVIRONMENTAL SERVICES, INC.  
7901 WEST MORRIS STREET • INDIANAPOLIS, IN 46231  
TELEPHONE 317/243-0811

Internet: <http://www.heritage-enviro.com>

## DOCUMENT NO.

703103

## WASTESTREAM

43421-1

## PICKUP DATE

24-OCT-97

## QUOTE

141250

## PICKUP TIME

N/A

## GROUP CODE

143111

## SCALE WEIGHTS

## SPECIAL INSTRUCTIONS

## CUSTOMER

*Emergency Rate.*

02:10 PM 10 25 97 77720

08:43 PM 10 25 97 73240

09:53 PM 10 25 97 28780

*DOT E-9166*

## PROCESS MATRIX CODE

HERITAGE ENVIRONMENTAL SERVICES  
HERITAGE REMEDIATION  
15330 CANAL BANK RD.  
LEMONT, IL 60439  
CONTACT: BARRY LEGG EXT.226 29

## PURCHASE ORDER NO.

BRUCE P

## RELEASE NO.

## WASTESTREAM COMMON NAME

HYDROCHLORIC ACID

## PRODUCT

4

## PRODUCT DESCRIPTION

WASTE ACID BULK

## HAZARD TYPE

CHARACTERISTIC

## HAZARD CODES

D002

## SYSTEM TYPE

(533-D) S02/T31/T23/T40/T21

## DOT DESCRIPTION

RQ, WASTE HYDROCHLORIC ACID, 8, UN1789, PG II, ERG# 157

## PROTECTIVE EQUIPMENT REQUIRED

CHEM RES GLVS, CHEM GLGLS, R BOOTS, FACE SHLD, PCTYVEK SUIT, RESP-ACID CART

## ADDITIONAL EQUIPMENT REQUIRED

NO ADDITIONAL EQUIPMENT SPECIFIED

## PUMPING DRUMS ?

N

## SPECIAL INSTRUCTIONS

NO SPECIAL INSTRUCTIONS

L  
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N  
G  
ARRIVAL  
DEPARTURE

GENERATOR: 43421  
US EPA/WELTMEYER

EPA ID NO.: ILP200001784

FRED BARTMANN

147752 SPAULDING  
HARVEY, IL 60426

(800)500-0575

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SIGNATURE: *Fred Bartmann*PRINT NAME: *Fred Bartmann*DATE: *10/25/97*

TRANSPORTER: 000  
HERITAGE TRANSPORT, INC.

EPA ID NO.: IND058484114

T  
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V  
E  
L  
ARRIVAL  
DEPARTURE

7901 WEST MORRIS STREET  
INDIANAPOLIS, IN 46231

(317)381-6848

This is to certify acceptance of this waste for transportation. Carrier certifies that the equipment supplied for this shipment is a proper container for the transportation of this commodity.

SIGNATURE: *Larry Hammer*PRINT NAME: *Larry Hammer*DATE: *10-25-97*

TSD FACILITY: 9000 48  
HERITAGE ENVIRONMENTAL SERVICES, INC.

EPA ID NO.: IND093219012

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ARRIVAL  
DEPARTURE

7901 WEST MORRIS STREET  
INDIANAPOLIS, IN 46231

(317)243-0811

This is to certify the acceptance of this waste for treatment and or disposal in accordance with all applicable regulations.

SIGNATURE: *Ed Such*PRINT NAME: *Ed Such*DATE: *10/25/97*

## ESTIMATED QUANTITY

4500

## UNIT

641

## HAZARDOUS MANIFEST NO.

*INA-1199064*

## GENERATOR MANIFEST NO.

*10383*

## DRIVER

*2105*

## TRACTOR

*310*

## TRAILER

*12-09*

## SPECIAL CHARGES

## INITIALS

EMERGENCY RATE: *YES* OR *NO*DEMURRAGE: *90* MINUTESLINER: *NO* USEDHOSE USED: *FEET*PUMPING: *DRUMS*TSD WAITING: *MINUTES*

## NET WEIGHT

*22.23*

## NO. OF DRUMS

## GROSS GALLONS

*4116*

## NET GALLONS

## SCALE UNIT

*% ACIDITY 28%*

## SCALE VALUE

## UNLOAD AUTH.

*10.302*

## TANK CODE

*12*

## LBS/GAL.

## TSD CODE

EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBER: 1-800-827-5221

MAIL TO GENERATOR





PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch typewriter.)

Form approved. OMB No. 2050-0039. Expires 9-30-95

UNIFORM HAZARDOUS  
WASTE MANIFEST

1. Generator's US EPA No. **ILP20000178410383**  
Manifest Document No. **10383**

2. Page 1 of 1  
Information in the shaded areas is not required by Federal law, but items D, F, H, I and K are required by State law.

3. Generator's Name and Mailing Address

**USEPA/Westmeyer  
77 W. Jackson Blvd Chicago, IL 60604**

A. State Manifest Document Number  
**INA 1199064**

4. Generator's Phone

**(312) 353-2318 Attn: Fred Bartman**

B. State Generator's ID  
**1752 Spaulding Ave  
Harvey, IL 60426**

5. Transporter 1 Company Name

**Heritage Transport Inc IND058484114**

C. State Transporter's ID  
**1554**

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone  
**317-381-6848**

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

**Heritage Environmental Services Inc  
7901 West Morris  
Indianapolis, IN 46231 IND093219012**

10. US EPA ID Number

G. State Facility's ID  
**9180970001**

H. Facility's Phone  
**317-243-0811**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers  
No. Type  
13. Total Quantity  
14. Unit Wt/Vol.  
I. Waste No.

a **R.Q. Waste Hydrochloric Acid, 8  
UN1789 PGII (D002)**

**001 TT 04500 G D002**

b

c

d

J. Additional Descriptions for Materials Listed Above

**11a 43421-1  
DOT E-9166**

K. Handling Codes for Wastes Listed Above

**502, T31 10-25-97  
T21 EGS**

15. Special Handling Instructions and Additional Information

**W0#10383 P.O.#79593**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Date  
Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date  
Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date  
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

Signature

Date  
Month Day Year

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

GENERATOR

TRANSPORTER

FACILITY

INA 1199064



**INSTRUCTIONS TO GENERATORS** (Please type or print clearly)

- (1) Enter generator's U.S. EPA twelve-digit identification number and the unique five digit document number assigned to this Manifest (e.g., 00001) by the generator.
- (2) Enter total number of pages comprising this Manifest.
- (3) Enter the generator's name and mailing address.
- (4) Enter telephone number where an authorized agent of the generator may be reached in event of an emergency.
- (5, 6) Enter company name and U.S. EPA I.D. number of the first transporter who will transport the waste.
- (7, 8) If applicable, enter company name and U.S. EPA I.D. number of the second transporter who will transport the waste. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA Form 8700-22A).
- (9, 10) Enter company name, site address, and U.S. EPA I.D. number of the facility designated to receive the waste listed on this Manifest.
- (11) Enter U.S. DOT Proper Shipping Name, Hazard Class, and I.D. number (UN/NA) for each waste as identified in 49 CFR 171 through 177. Note: If additional space is needed for waste descriptions, enter in Item 28 on the Continuation Sheet (EPA Form 8700-22A).
- (12) Enter number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Table I - Types of Containers

DM-Metal drums  
DW-Wooden drums  
DF-Fiberboard/plastic  
TP-Tanks portable

TT-Tank Trucks  
TC-Tank cars  
DT-Dump truck  
CY-Cylinders

CM-Metal boxes (including roll-offs)  
CW-Wooden boxes  
CF-Fiber or plastic boxes  
BA-Bags

- (13) Enter total quantity of waste described on each line.
- (14) Enter appropriate abbreviation from Table II (below) for the unit of measure.

Table II - Units of Measure

P = Pounds  
K = Kilograms  
Y = Cubic yards  
N = Cubic meters

L = Liters (liquids only)  
G = Gallons (liquids only)  
T = Tons (2,000 lbs.)  
M = Metric tons (1,000 kg.)

- (16) The generator must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below.

**THE FOLLOWING INFORMATION IN THE SHADED AREAS IS REQUIRED BY INDIANA STATE LAW**

- (D) Enter the phone number of first transporter.
- (F) Enter the phone number of second transporter.
- (H) Enter the phone number of the designated facility.
- (I) Enter the appropriate EPA waste code.
- (K) Enter the handling code which reflects the ultimate disposition of the waste at the facility.

**GENERATOR IN STATE** Retain Copy 8 and detach and mail Copy 2 to Indiana D.E.M.

**GENERATOR OUT OF STATE:** Retain Copy 8 and mail Copy 2 to the Generator State (if applicable) and mail Copy 3 to Indiana D.E.M.

**INSTRUCTIONS TO TRANSPORTERS** (Please type or print clearly)

- (17, 18) Enter name of person accepting the waste on behalf of the transporter. That person must acknowledge acceptance of the waste described on the Manifest by signing, and entering the date of receipt.

**TRANSPORTER(S):** Retain Copy 7 (Copy 6) and leave remaining copies with FACILITY OWNER/OPERATOR.

**INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES** (Please type or print clearly)

- (19) The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any discrepancy between the waste described on the Manifest and the waste actually received at the facility.
- (20) Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**OWNER/OPERATOR IN STATE:** Retain Copy 5, return Copy 4 to generator and mail Copy 1 to Indiana D.E.M.

**OWNER/OPERATOR OUT OF STATE:** Retain Copy 5, return Copy 4 to generator, mail Copy 1 to the TSD State (if applicable) and mail Copy 3 to Indiana D.E.M.

Indiana generators and TSD facilities must mail the required manifest copies to the State of Indiana within five (5) working days of shipment or receipt of the waste (IC 13-7-8.5-7).

Address all manifest copies:

Indiana Department of Environmental Management  
Office of Solid and Hazardous Waste Management  
P.O. Box 7035  
Indianapolis, IN 46207-7035  
Manifest Tracking Phone Number: (317) 232-7959

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M. St., SW., Washington, D.C. 20460 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.



## SERVICE LOCATION

INDIANAPOLIS, IN

LOT CODE: 360951

STOP CODE: 181848

Miles: 176



CORPORATE HEADQUARTERS  
HERITAGE ENVIRONMENTAL SERVICES, INC.  
7901 WEST MORRIS STREET • INDIANAPOLIS, IN 46231  
TELEPHONE 317/243-0811

Internet: <http://www.heritage-enviro.com>

## DOCUMENT NO.

703301

## WASTESTREAM

43421-1

## PICKUP DATE

27-OCT-97

## QUOTE

141250

## PICKUP TIME

N/A

## GROUP CODE

143122

## SCALE WEIGHTS

## SPECIAL INSTRUCTIONS

## CUSTOMER

02:02 PM 10 27 97 45920

11:31 PM 10 27 97 39040

11:57 PM 10 27 97 27640

HERITAGE ENVIRONMENTAL SERVICES  
HERITAGE REMEDIATION  
15330 CANAL BANK RD.  
LEMONT, IL 60439  
CONTACT: BARRY LEGG EXT.226 29

## PURCHASE ORDER NO.

10383

## RELEASE NO.

## WASTESTREAM COMMON NAME

HYDROCHLORIC ACID

## PRODUCT

4

## PRODUCT DESCRIPTION

WASTE ACID BULK

## HAZARD TYPE

CHARACTERISTIC

## HAZARD CODES

D002

## PROCESS MATRIX CODE

## SYSTEM TYPE

(533-D) S02/T31/T23/T40/T21

## DOT DESCRIPTION

RD, WASTE HYDROCHLORIC ACID, 8, UN1789, PG II, ERG# 157

## PROTECTIVE EQUIPMENT REQUIRED

CHEM RES GLVS, CHEM GLGLS, R BOOTS, FACE SHLD, PCTYVEK SUIT, RESP-ACID CART

## ADDITIONAL EQUIPMENT REQUIRED

NO ADDITIONAL EQUIPMENT SPECIFIED

## PUMPING DRUMS ?

N

## SPECIAL INSTRUCTIONS

NO SPECIAL INSTRUCTIONS

L O A D I N G D E P A R T U R E	GENERATOR: 43421	EPA ID NO.: ILP200001784
	US EPA/WELTMEYER	FRED BARTMANN
	147752 SPAULDING	(800)500-0575
	HARVEY, IL 60426	
This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.		

SIGNATURE: <i>Fred Bartmann</i>	PRINT NAME: <i>FRED BARTMANN</i>	DATE: <i>10/27/97</i>
TRANSPORTER: 000		EPA ID NO.: IND058484114
HERITAGE TRANSPORT, INC.		

T R A V E L D E P A R T U R E	7901 WEST MORRIS STREET	(317)381-6848
	INDIANAPOLIS, IN 46231	
	This is to certify acceptance of this waste for transportation. Carrier certifies that the equipment supplied for this shipment is a proper container for the transportation of this commodity.	
	SIGNATURE: <i>Larry Hunter</i> PRINT NAME: <i>LARRY HUNTER</i> DATE: <i>10/27/97</i>	

U N L O A D I N G D E P A R T U R E	TSD FACILITY: 9000 48	EPA ID NO.: IND093217012
	HERITAGE ENVIRONMENTAL SERVICES, INC.	
	7901 WEST MORRIS STREET	(317)243-0811
	INDIANAPOLIS, IN 46231	

U N L O A D I N G D E P A R T U R E	This is to certify the acceptance of this waste for treatment and or disposal in accordance with all applicable regulations.	
	SIGNATURE: <i>Ed Stucky</i> PRINT NAME: <i>ED STUCKY</i> DATE: <i>10/27/97</i>	
	EMERGENCY CHEMICAL ASSISTANCE TELEPHONE NUMBER: 1-800-827-5221	
	MAIL TO GENERATOR	

## ESTIMATED QUANTITY

## UNIT

2000

B

## HAZARDOUS MANIFEST NO.

TNA 0933742

## GENERATOR MANIFEST NO.

10277

## DRIVER

## TRACTOR

## TRAILER

2105

310

12-05

## SPECIAL CHARGES

## INITIALS

EMERGENCY RATE: YES OR NO

DEMURRAGE: MINUTES

LINER: NO. USED

HOSE USED: FEET

PUMPING: DRUMS

TSD WAITING MINUTES

## NET WEIGHT

## NO. OF DRUMS

## GROSS GALLONS

## NET GALLONS

1075

SCALE UNIT

## SCALE VALUE

## UNLOAD AUTH.

## TANK CODE

## LBS/GAL.

## TSD CODE

10.606

12





INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT  
P.O. Box 7035  
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA No.

Manifest  
Document No.

2. Page 1

Information in the shaded areas is  
not required by Federal law, but  
items D, F, H, I and K are required by  
State law.

3. Generator's Name and Mailing Address

US EPA/Weltmeyer  
147752 Spaulding  
Harvey IL 60426

A. State Manifest Document Number

INA 0933742

B. State Generator's ID

4. Generator's Phone ( )

500 500-0575

6. US EPA ID Number

IND055484114

C. State Transporter's ID

D. Transporter's Phone

317-391-6505

5. Transporter 1 Company Name

Heritage Transport IN

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Heritage Environmental Services Inc.  
7901 West Morris Street  
Indianapolis IN 46231

10. US EPA ID Number

IND093219012

G. State Facility's ID

H. Facility's Phone

317-243-0811

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total  
Quantity

14. Total  
Wt/Vol.

I. Waste No.

a R.O. waste Hydrochloric Acid, 8,  
UN 1789, PG II, ERG 157

001 TT

10/28/97  
01075  
G

D002

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

T-21

15. Special Handling Instructions and Additional Information

24 HR. Emergency Phone  
800-500-0575

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

FRED BARTMAN

Fred Bartman

Month Day Year

10 27 97

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

LARRY HAMMER

Larry Hammer

Month Day Year

10 27 97

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

.

19. Discrepancy Indication Space

Volume discrepancy confirmed with Barry Legg / Fred Britmann  
10/28/97 GW.

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name

Signature

ED STUCKEY

Ed Stucky

Month Day Year

10 27 97



### INSTRUCTIONS TO GENERATORS (Please type or print clearly)

- (1) Enter **generator's** U.S. EPA twelve digit identification number and the unique five digit document number assigned to this Manifest (e.g., 00001) by the generator.
- (2) Enter total number of pages comprising this Manifest.
- (3) Enter **generator's** name and mailing address.
- (4) Enter telephone number where an authorized agent of the **generator** may be reached in event of an emergency.
- (5, 6) Enter company name and U.S. EPA I.D. number of the first **transporter** who will transport the waste.
- (7, 8) If applicable, enter company name and U.S. EPA I.D. number of the second **transporter** who will transport the waste. If more than two transporters are used, enter each additional transporter's information on the Continuation Sheet (EPA Form 8700-22A).
- (9, 10) Enter company name, **site** address, and U.S. EPA I.D. number of the **facility** designated to receive the waste listed on this Manifest.
- (11) Enter U.S. DOT Proper Shipping Name, Hazard Class, and I.D. number (UN/NA) for each waste as identified in 49 CFR 171 through 177. Note: If additional space is needed for waste descriptions, enter in Item 28 on the Continuation Sheet (EPA Form 8700-22A).
- (12) Enter number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

Table I - Types of Containers

DM-Metal drums	TT-Tank Trucks	CM-Metal boxes (including roll-offs)
DW-Wooden drums	TC-Tank cars	CW-Wooden boxes
DF-Fiberboard/plastic	DT-Dump truck	CF-Fiber or plastic boxes
TP-Tanks portable	CY-Cylinders	BA-Bags

- (13) Enter total quantity of waste described on each line.
- (14) Enter appropriate abbreviation from Table II (below) for the unit of measure.

Table II - Units of Measure

P = Pounds	L = Liters (liquids only)
K = Kilograms	G = Gallons (liquids only)
Y = Cubic yards	T = Tons (2,000 lbs.)
N = Cubic meters	M = Metric tons (1,000 kg.)

- (16) The **generator** must read, sign (by hand), and date the certification statement. If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, or air) inserted in the space below.

### THE FOLLOWING INFORMATION IN THE SHADED AREAS IS REQUIRED BY INDIANA STATE LAW

- (D) Enter the phone number of **first transporter**.
- (F) Enter the phone number of **second transporter** (if applicable).
- (H) Enter the phone number of the designated facility.
- (I) Enter the most appropriate EPA waste code.
- (K) Enter the handling code which reflects the ultimate disposition of the waste at the facility.

**GENERATOR IN STATE** Retain **Copy 8** and detach and mail **Copy 2** to Indiana D.E.M.

**GENERATOR OUT OF STATE:** Retain **Copy 8** and mail **Copy 2** to the Generator State (if applicable) and mail **Copy 3** to Indiana D.E.M.

### INSTRUCTIONS TO TRANSPORTERS (Please type or print clearly)

- (17, 18) Enter name of the person accepting the waste on behalf of the **transporter**. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**TRANSPORTER(S):** Retain **Copy 7 (Copy 6)** and leave remaining copies with **FACILITY OWNER/OPERATOR**.

### INSTRUCTIONS TO OWNERS AND OPERATORS OF TREATMENT, STORAGE, OR DISPOSAL FACILITIES (Please type or print clearly)

- (19) The authorized representative of the designated (or alternate) facility's owner or operator must note in this space any discrepancy between the waste described on the Manifest and the waste actually received at the facility.
- (20) Print or type name of the person accepting the waste on behalf of the owner or operator of the facility. That person must acknowledge acceptance of the waste described on the Manifest by signing and entering the date of receipt.

**OWNER/OPERATOR IN STATE:** Retain **Copy 5**, return **Copy 4** to generator and mail **Copy 1** to Indiana D.E.M.

**OWNER/OPERATOR OUT OF STATE:** Retain **Copy 5**, return **Copy 4** to generator, mail **Copy 1** to the TSD State (if applicable) and mail **Copy 3** to Indiana D.E.M.

Indiana generators and TSD facilities must mail the required manifest copies to the State of Indiana within five (5) working days of shipment or receipt of the waste (IC 13-7-8.5-7).

Address all manifest copies:

Indiana Department of Environmental Management  
Office of Solid and Hazardous Waste Management  
P.O. Box 7035  
Indianapolis, IN 46207-7035  
Manifest Tracking Phone Number: (317)232-7959

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M. St., SW., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.